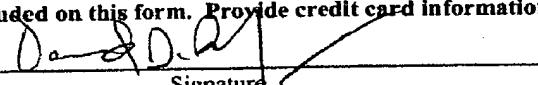


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 741124-63
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b> [37 CFR 1.8(o)]  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop <b>AE</b> , Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at <b>703-872-9306</b> , on <b>January 27, 2005</b> .  Signature:  Name: <b>Kathleen M. McManus</b>	In re Application of Dieter BUSCH	
	Application Number: <b>09/729,422</b>	Filed: <b>December 5, 2000</b>
For: <b>ERGONOMIC, INTERFERENCE SIGNAL-REDUCING POSITION MEASUREMENT PROBE FOR MUTUAL ALIGNMENT OF BODIES</b>		
Group Art Unit: <b>2859</b>	Examiner: <b>T.M. Reis</b>	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate entity fee are as follows (check time period desired):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) <span style="float: right;">\$ _____</span> <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) <span style="float: right;">\$225.00</span> <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) <span style="float: right;">\$ _____</span> <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) <span style="float: right;">\$ _____</span> <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) <span style="float: right;">\$ _____</span>		
<input checked="" type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380(741124-63)</u> . I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) .		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
 Signature <b>David S. Safran</b> Typed or printed name		<u>January 27, 2005</u> Date <u>703-827-8094</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of <b>1</b> forms are submitted.		

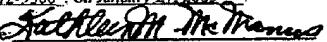
SEND TO: Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

W312565.1

## PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
741124-63CERTIFICATE OF MAILING OR  
TRANSMISSION  
(37 CFR 1.8(a))

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Signature: 

Name: Kathleen M. McManus

In re Application of  
Dieter BUSCH

Application Number: 09/729,422 Filed: December 5, 2000

For: ERGONOMIC, INTERFERENCE SIGNAL-REDUCING POSITION  
MEASUREMENT PROBE FOR MUTUAL ALIGNMENT OF BODIES

Group Art Unit: 2859

Examiner: T.M. Reis

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows  
(check time period desired):

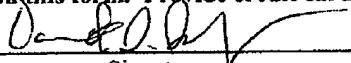
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)	\$225.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____

Applicant claims small entity status.  
 A check to cover the fee is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  
 The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380(741124-63). I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor

assignee of record of the entire interest. See 37 CFR 3.71.  
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a).  
 Registration number if acting under 37 CFR 1.34(a) .

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

 January 27, 2005

Date

Signature

David S. Safran

Typed or printed name

703-827-8094

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of \_\_\_\_\_ forms are submitted.

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Alexandria, VA 22313-1450

W312565.1

# FEE TRANSMITTAL FOR FY 2005

*Parent fees are subject to annual revision.*

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** **\$225.00**

<i>Complete if Known</i>	
Application Number	09/729,422
Filing Date	December 5, 2000
First Named Inventor	Dieter BUSCH
Examiner Name	T.M. Reis
Art Unit	2859
Attorney Docket No.	741124-63

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None

Deposit Account:

Deposit Account Number **19-2380(741124-63)**

Deposit Account Name **Nixon Peabody LLP**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001	790	2001	385
1002	340	2002	170
1003	530	2003	265
1004	770	2004	385
1005	160	2005	80

**SUBTOTAL (1) (\$ 0)**

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	6	-20** = 0	X 0 = 0
Independent Claims	5	-9** = 0	X 0 = 0
Multiple Dependent		X 0 = 0	

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202	18	2202
1203	86	2201
1204	290	2203
1205	86	2204
	18	2205

**SUBTOTAL (2) (\$ 0)**

\*\*or number previously paid, if greater: For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	
Fee Code (\$)	Fee Code (\$)		
1051	130	Surcharge - late filing fee or oath	
1052	50	Surcharge - late provisional filing fee or cover sheet	
1053	130	Non-English specification	
1812	2,520	For filing a request for ex parte reexamination	
1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	Extension for reply within first month	
1252	450	Extension for reply within second month	
1253	1,020	Extension for reply within third month	225.00
1254	1,590	Extension for reply within fourth month	
1255	2,160	Extension for reply within fifth month	
1401	330	Notice of Appeal	
1402	330	Filing a brief in support of an appeal	
1403	290	Request for oral hearing	
1451	1,510	Petition to institute a public use proceeding	
1452	110	Petition to revive - unavoidable	
1453	1,330	Petition to revive - unintentional	
1501	1,330	Utility issue fee (or reissue)	
1502	480	Design issue fee	
1503	640	Plant issue fee	
1460	130	Petitions to the Commissioner	
1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	Submission of Information Disclosure Stmt	
8021	40	Recommending each patent assignment per property (times number of properties)	
1809	770	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	Request for Continued Examination (RCE)	
1802	900	Request for expedited examination of a design application	
Other fee (specify) _____			

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) \$225.00**

## CERTIFICATE OF MAILING OR TRANSMISSION (37 CFR 1.8(a))

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transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) 272-2800

January 27, 2005

Date

*Kathleen M. McManus*  
Signature  
Kathleen M. McManus  
Typed or printed name

SUBMITTED BY		Complete if applicable		
Name (Print/Type)	David S. Safran	Registration No.	27,997	Telephone (703) 827-8094
Signature	<i>David S. Safran</i>	(Attorney/Agent)		Date January 27, 2005

SEND TO: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

NVA259915.1